Consultation announced on Deprivation of Liberty Safeguards

DRAFT PROPOSALS for a new framework to protect people who lack mental capacity but need to be deprived of their liberty to receive care have been published for consultation.

The Law Commission wants to replace the existing Deprivation of Liberty Safeguards (DoLS) in England and Wales because it says they are not meaningful for older people and their families, and local councils and the NHS are struggling to meet their legal obligations. People in other settings – such as supported living – are also unprotected.

The DoLS were intended to ensure that people who lack capacity to consent to care are deprived of their liberty only if it is in their best interests. Capacity assessments are made independently of hospitals or care homes, and decisions can be challenged by appeal to the Court of Protection.

But the commission argues that the system is cumbersome and, since a Supreme Court judgement broadened the definition of ‘deprivation of liberty’, it has placed increasing burdens on local authorities and the NHS.

The commission proposes that the DoLS be replaced with a new system of protective care. Safeguards should be extended to people living in supported environments or at home, as well as other hospital settings such as emergency departments and palliative care. Anyone subject to protective care should be provided with an advocate.

Capacity assessments under the DoLS are made by best interest assessors. The commission is seeking views on whether this role should be known as approved mental capacity professionals (AMCPs) and regulated. AMCPs would be able to authorise individual care plans and place conditions on the provision of care and treatment.

The commission is also proposing that appeals should no longer be heard by the Court of Protection but locally by a specialist tribunal, which includes medical and mental health practitioners.

The consultation is open until November 2, visit tinyurl.com/q2mh6w8

Unsafe discharge from hospital highlighted in watchdog report

INEFFECTIVE COMMUNICATION and poor co-ordination between services are resulting in unsafe hospital discharges, according to an official healthcare watchdog.

Basic flaws in the discharge process, including failure to ask vulnerable people if they have a safe place to which they can be discharged, or to inform families their loved ones are leaving hospital, are highlighted in a report by Healthwatch England.

The report is based on surveys of more than 3,000 vulnerable people who have been through the discharge process.

A freedom of information request completed by 120 trusts in May found 53% did not routinely ask patients if they would have essential food, water and heating when they returned home.

A YouGov poll of 3,495 adults in England found 26% of those admitted to hospital were readmitted within 28 days of discharge.

Many of those who are discharged feel ‘rushed out of the door’, states the report. Nurses are, however, at the forefront of good discharge policy. At University Hospitals of Morecambe Bay NHS Foundation Trust, matron for acute medicine Haley Reading introduced a ‘food to go’ scheme that gives patients a bag of essential groceries, such as milk and bread, when they are discharged.

Essential services are crucial to tackling loneliness

ONE IN five people aged 60 and over who experience loneliness say they have no one to turn to, according to a survey.

The Campaign to End Loneliness, which published the poll, is warning that loneliness and isolation are as harmful as smoking 15 cigarettes a day and is calling on local authorities to take the lead in reducing and preventing loneliness.

The organisation has launched online guidance advising local authorities of the essential services that are needed to support older people, particularly transport and technology.

Campaign director Laura Alcock-Ferguson said: ‘Local authorities are making crucial decisions about their services and need to recognise the potentially devastating impact that these changes may have on an older person’s ability to stay in touch with their friends, family and neighbours. ’

‘We need local authorities to address the many triggers of loneliness by maintaining and providing essential services that older people rely on to stay connected. This could be transport to help with shopping or support with getting online.’

See continuing professional development, page 31

Find out more campaigntoendloneliness.org/guidance

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